

CALIFORNIA MEDICAL ASSOCIATION

This department contains official notices, reports of county society proceedings and other information having to do with the State Association and its component county societies. The copy for the department is submitted by the State Association Secretary, to whom communications for this department should be sent. Rosters of State Association officers and committees and of component county societies and affiliated organizations, are printed in the front advertising section (Adv. pages 2, 4 and 6).

CALIFORNIA MEDICAL ASSOCIATION

ROBERT A. PEERS.....President
EDWARD M. PALLETTE.....President-Elect
FREDERICK C. WARNSHUIS.....Secretary-Treasurer and Associate Editor for California

STATE AND COUNTY SOCIETY ACTIVITIES

"BROTHER, CAN'T YOU SPARE A DIME?"

In the body of this comment the "dime" will be raised to the "dollar" denomination. As you read on, may they become in your thoughts several hundreds of dollars.

In the February and March issues an editorial and comments, under "I Give and Bequeath," were published, earnestly suggesting and inviting members and lay friends to determine to arrange to give now or bequeath in their wills a definite sum of money toward an Association Endowment Fund. The principal gift to remain intact in perpetuity or for a given number of years, as the donor may elect; the interest income of the endowment to be used to promote some specific project or cause or to defray the expenses of the expanding activities of the Association. Such endowment gifts may be designated as memorials to individuals or relatives. It is felt that some members have paused to consider this solicitation and that others may need further incentive ere they respond. Hence further comment.

Our Association fails unwillingly to participate in this or that movement, to initiate new movements, or to promote or enlarge this or that activity, solely because funds are not available to defray the expense that is entailed. The Association is hampered, restrained and rendered inactive in representing public and professional interests in many avenues where, were we financially able, it would be possible to achieve great good for human health welfare. It is regrettable that these opportunities cannot be embraced and Association support contributed. Our present sources of income cannot be expanded, hence the appeal is being made to those who are able, to provide additional funds by endowment gifts now or in their wills.

Brother, can't you spare a "thousand or even more dollars" for such an endowment? Posterity will be beholden to you for all time if you can and will. Will you?

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PRESIDENT'S DINNER

As indicated in the program, the dinner in honor of our president will be given at 7:15 p. m. on Tuesday evening, May 26, in the dining room of the Hotel Del Coronado. This function is a feature of the entertainment of an annual session. It has always been a most enjoyable social affair.

Advance reservations for rooms indicate a large attendance. Hotel facilities will be severely taxed. The management is bending effort to serve the greatest number its facilities permit, and yet we fear that it will be impossible to accommodate all. So first come will be first served.

A ticket limitation has been imposed. A ticket is required for every individual. *No admittance without a ticket. Obtain your ticket when you register.*

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YOUR BUSINESS PATRONS

Costs of publication would constitute a large draft on Association funds were it not for advertising income. These advertisers are your individual business patrons. They, by their patronage, make it possible to issue your JOURNAL with its present contents, form, and style. That fact is all too often overlooked by the member. There

are those who rarely, if ever, give thought to those who pay for space on our advertising pages. This is not the spirit of reciprocity.

Our advertisers are all firms of highest integrity, and merit not only your patronage, but also your confidence. Their advertisements in each issue is a personal card of introduction to you, and when a representative calls on you he should be accorded preference over those who may represent non-advertisers. Other things being equal, confer your patronage to our advertisers, and by all means read and answer their advertisements.

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PRINCIPLES OF ETHICS

Last month Chapters I and II were printed. Chapter III merits mature reflection.

Chapter III

The Duties of Physicians to Each Other and to the Profession at Large

ARTICLE I. DUTIES TO THE PROFESSION UPHOLD HONOR OF PROFESSION

Section 1. The obligation assumed on entering the profession requires the physician to comport himself as a gentleman and demands that he use every honorable means to uphold the dignity and honor of his vocation, to exalt its standards and to extend its sphere of usefulness. A physician should not base his practice on an exclusive dogma or sectarian system, for "sects are implacable despots; to accept their thralldom is to take away all liberty from one's action and thought." (Nicon, father of Galen.)

MEDICAL SOCIETIES

Sec. 2. In order that the dignity and honor of the medical profession may be upheld, its standards exalted, its sphere of usefulness extended, and the advancement of medical science promoted, a physician should associate himself with medical societies and contribute his time, energy and means in order that these societies may represent the ideals of the profession.

DEPORTMENT

Sec. 3. A physician should be "an upright man, instructed in the art of healing." Consequently, he must keep himself pure in character and conform to a high standard of morals, and must be diligent and conscientious in his studies. "He should also be modest, sober, patient, prompt to do his whole duty without anxiety; pious without going so far as superstition, conducting himself with propriety in his profession and in all the actions of his life." (Hippocrates.)

ADVERTISING

Sec. 4. Solicitation of patients by physicians as individuals, or collectively in groups by whatsoever name these be called, or by institutions or organizations, whether by circulars or advertisements, or by personal communications, is unprofessional. This does not prohibit ethical institutions from a legitimate advertisement of location, physical surroundings and special class—if any—of patients accommodated. It is equally unprofessional to procure patients by indirection through solicitors or agents of any kind, or by indirect advertisement, or by furnishing or inspiring newspaper or magazine comments concerning cases in which the physician has been or is concerned. All other like self-laudations defy the traditions and lower the tone of any profession and so are intolerable. The most worthy and effective advertisement possible, even for a young physician, and especially with his brother physicians, is the establishment of a well merited reputation for professional ability and fidelity. This cannot be forced, but must be the outcome of character and conduct. The publication or circulation of ordinary simple business cards, being a matter of personal taste or local custom, and sometimes of convenience, is not *per se* improper. As implied, it is unprofessional to disregard local customs and offend recognized ideals in publishing or circulating such cards.

It is unprofessional to promise radical cures; to boast of cures and secret methods of treatment or remedies; to exhibit certificates of skill or of success in the treatment of diseases; or to employ any methods to gain the attention of the public for the purpose of obtaining patients.

PATENTS AND PERQUISITES

Sec. 5. It is unprofessional to receive remuneration from patents for surgical instruments or medicines; to accept rebates on prescriptions or surgical appliances, or perquisites from attendants who aid in the care of patients.

MEDICAL LAWS—SECRET REMEDIES

Sec. 6. It is unprofessional for a physician to assist unqualified persons to evade legal restrictions governing the practice of medicine; it is equally unethical to prescribe or dispense secret medicines or other secret remedial agents, or manufacture or promote their use in any way.

SAFEGUARDING THE PROFESSION

Sec. 7. Physicians should expose without fear or favor, before the proper medical or legal tribunals, corrupt or dishonest conduct of members of the profession. All questions affecting the professional reputation or standing of a member or members of the medical profession should be considered only before proper medical tribunals in executive sessions or by special or duly appointed committees on ethical relations. Every physician should aid in safeguarding the profession against the admission to its ranks of those who are unfit or unqualified because deficient either in moral character or education.

ARTICLE II. PROFESSIONAL SERVICES OF PHYSICIANS TO EACH OTHER

PHYSICIANS DEPENDENT ON EACH OTHER

Section 1. Experience teaches that it is unwise for a physician to treat members of his own family or himself. Consequently, a physician should always cheerfully and gratuitously respond with his professional services to the call of any physician practicing in his vicinity, or of the immediate family dependents of physicians.

COMPENSATION FOR EXPENSES

Sec. 2. When a physician from a distance is called on to advise another physician or one of his family dependents, and the physician to whom the service is rendered is in easy financial circumstances, a compensation that will at least meet the traveling expenses of the visiting physician should be proffered. When such a service requires an absence from the accustomed field of professional work of the visitor that might reasonably be expected to entail a pecuniary loss, such loss should, in part at least, be provided for in the compensation offered.

ONE PHYSICIAN TO TAKE CHARGE

Sec. 3. When a physician or a member of his dependent family is seriously ill, he or his family should select a physician from among his neighboring colleagues to take charge of the case. Other physicians may be associated in the care of the patient as consultants.

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MEDICAL-LEGAL TESTIMONY

Expert opinion and testimony is becoming more and more discredited by juries, referees, and commissioners. This situation has become quite apparent in recent years. The Bar and courts have commented upon the problem. It involves all controversies presenting special acts and practices as factors in the dispute. We are only concerned in so far as intolerable conditions and events relate to medical-legal expert testimony.

Unity and agreement in opinions cannot be attained. Differences of opinions must and do exist—it cannot be otherwise. Honest differences are based upon honest convictions and rest upon palpable facts and factors that make them tenable—these command respect and permit one to draw his personal conclusions.

However, it is recognized that there is a serious, increasing evil rampant in a type or class of opinions that are attempted to be made plausible by bizarre, fabricated, nebulous and untruthful alleged facts. It is this latter type of expert opinion that demands exposure and censor of those who thus stultify themselves and contribute to the defeat of justice—most always for a fee.

Without mincing words, there are doctors who are willing to pose as experts and who base their opinions on premises that are not in accord with scientific fact or accepted opinion and practice for the sole reason of obtaining a fee and abetting an attorney who is seeking to win a case by hook or crook. These so-called experts merit not only exposure, but severest censor and discipline.

Many of them are known and it is common knowledge that they can be bought for a price to warp and mold their testimony and opinion in the interest of the party paying their fee. They have been tolerated and at times ostracized, but continue as members in our organizational ranks. We are in part culpable for their conduct because we have not called them to task.

The time is at hand when we must free ourselves of culpability. Therefore, it is suggested that each county society appoint a board for review of medical testimony. This board is to be given authority to call in members and require explanation and justification for their testimony in any given case that is at variance with scientific fact or accepted opinion. The willful, malicious, conniving medical witness or expert should then be subjected to disciplinary measures. We are in duty bound to set our own house in order. Shall we not undertake to do so?

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BIG AND LITTLE THINGS

Unless a person is in immediate contact with the office of the Association, he has no conception of the nature of the communications and reports that flow across the desk. It is a never-ending, varied stream of big and little things. Each item has some bearing upon organizational work. The little items are sometimes big, and the big items shrink to little ones—all are big to the individual writing on this or that. The four daily mail deliveries will bring in a daily average of one hundred pieces of first-class mail. Each promptly receives immediate attention. The outgoing mail may be from fifty to six thousand pieces. In March there were three days when over six thousand pieces of mail were addressed and mailed. There were days when for over a week more than three hundred pieces of mail were received. To give a bit of insight the following instances, that occur daily, are related:

Personal.—Daily, several letters relating to members' personal affairs are received. Subjects are: insurance, investments, books, journals, contract, legal problems, clinics, laws, sanitariums, automobiles, professional cards, colleges, hospitals, locations, associates, consultants. In fact, the range runs the gamut of personal interests. We are glad to receive them and seek to be helpful by prompt replies.

Public.—The lay inquiries cover every imaginable subject. These also receive prompt replies, and frequently writers are urged to confer with county society officers. Never is a single physician's name sent in response to recommend a physician or specialist. The advice is to consult the county society.

Mailing Addresses.—A mailing address list of members is never sent except to our own members or government officials.

Press Clippings.—Through a clipping service, items appearing in newspapers of the State, dealing with hospitals, health, medical care, legislation, meetings, and State agencies, are received and read. This is a valuable source of information.

Journals.—Sixty-five weekly and monthly medical journals are received and reviewed. Another valuable source of information.

Referring.—Everything bearing upon a subject that is being considered by a standing or special committee is referred to the committee chairman. Copies are often sent to state and county officers.

Examples.—One member wanted to know why he could not have his office in a restricted residence zone. A member wanted to know if it were permissible to have a cartoon of himself published in a local paper. A woman wanted to know how much ground glass it would take to kill a person. A man wanted to know if he could not sue a doctor who refused to accept him as a patient. A woman wanted to know how to tell when her husband was drunk. A bachelor wanted to sell his body when he died, and asked if we would send him the name of a doctor who would pay him \$100. A housewife desired to know if she could sue a doctor who declined to answer a call and treat her. Invited to hold a \$14,000 bet that one man could drink a gallon of whisky a day for seven days and eat the glass containers and survive. Traffic officer asks if there is any test he can make that will determine if a driver is drunk. Reporter wants to know if the Association will

support a certain candidate for office. Similar incidents could be cited at length.

Sustained effort is made to cause the office to be of the greatest possible service not only to our members, but also to the public.

REDUCED RAILWAY FARES

Arrangements have been made whereby members going by train to the annual session in Coronado may secure reduced railroad fares.

To secure these reduced rates *send your request and a self-addressed stamped envelope* to the State Secretary. A certificate will be mailed to you promptly. Present this certificate to your ticket agent when purchasing transportation. This certificate is necessary to secure reduced rates.

The following information comes from the railway passenger department:

ROUND-TRIP RAIL CONVENTION FARES AND ARRANGEMENTS

Ticket agents of principal rail lines in California, on presentation and surrender of identification certificate, will sell round-trip tickets to San Diego costing approximately one and one-quarter cents per mile, which is less than the first-class one-way fare. Tickets will be sold from May 20 to 28, inclusive, and return limit will be June 7. Stopovers allowed. If longer return limit is desired, consult railroad ticket agent at San Diego prior to June 7.

Following are examples of fares to San Diego, and illustrate the extent of reductions:

From	Convention Round Trip (85%)	Ten-Day Round Trip Coach	21-Day Round Trip First Class
San Francisco	\$15.85	\$22.58	\$24.85
San Jose	14.65	20.90	23.00
Los Angeles	10.90	15.61	17.20

MALPRACTICE INSURANCE

The following is a general tabulation of the answers returned to the questionnaire recently sent to the members by the Special Committee that has been making an investigation for the purpose of devising a plan to provide adequate protection to those who are sued on alleged claims for malpractice.

TABLE 1.—Count on Malpractice Poll: California Medical Association*

	Members
\$10,000-\$30,000 policies	1,812
\$30,000 and over	464
Medical Protective Company	1,192
U. S. F. & G. Company	581
Etna Insurance Company	169
Lloyds	136
Increased premiums	772
Withdrawal of insurance	150
Reduction of insurance	197
Interested in group insurance	1,944
Not interested in group insurance	343
Willing to subscribe \$50 stock	1,586
Not willing to subscribe stock	698

* As of April 8, 1936.

It was quite evident from many of the answers and comments returned that a considerable number of our members do not grasp or have a clear conception of the basic essentials and factors involved in this legal problem. An endeavor will be made to clarify some of the major points that have caused confusion.

There were those who did not see the need of organizing our own company. Suggestions were made that dues be increased and defense be provided by Association funds. State laws classify this protection as a form of insurance. To provide this protection it is, therefore, necessary to comply with state insurance laws and meet up to the requirements of those laws. This means that a corporation or company must be organized. This protection cannot be given as an Association member's benefit.

Some thought that \$50 stock subscriptions were too high. The law requires that \$100,000 must be deposited with the Insurance Commissioner before a permit to do business is issued. This amount must be deposited in one lump sum; it cannot be made in payments over a period of time. It has to be made in the form of actual money

or sound approved securities. Sound business requires a reserve fund of at least \$50,000. Fifty-dollar stock subscriptions from 3,500 members will provide this initial required capital.

These stock subscriptions cannot be applied on premiums. It is only fair that the members who subscribe for stock should have an interest return upon their subscriptions that will make this insurance protection available to those who do not or cannot subscribe for capital stock.

Suggestions were made to place the risk with a given company. That company is not authorized to do business in California.

The question was raised as to ability and experience to operate such a company. It is purposed to employ an experienced director in this special insurance field, and he naturally will be thoroughly experienced and competent.

The risk was mentioned. Under the proposed plan the risk will be greatly reduced. In addition, there will be 40 per cent of the premiums in reserve that other companies pay to brokers, agents, and sales expense. As soon as a safe, ample reserve is built up, premiums can be reduced.

Applicants for insurance will not be accepted until they have been approved by a local committee. Precautions to be observed by policyholders will be a condition, and this will go far in defeating claims.

Experience and practices of existing companies cannot be cited as examples. Their methods of handling claims and suits do not reflect efficiency or approved standards. Their methods have done much to create present conditions and have caused the steady increase in premium rates. Experiences in other states support this statement. Doctors have been called upon to pay and pay, because of certain practices.

Premiums will be fixed at the lowest possible rate—equal the first year to existing rates, and reduced as business and experience justifies. Coverage will be greater and more complete than is obtainable today. Defense and refusal to settle will be an important feature, and will go far in defeating verdicts for unwarranted amounts.

Members will no longer be at the mercy of commercial companies who may withdraw any moment or who may impose unsatisfactory conditions and restrict their coverage.

Our own company, under our own supervision, will restore to us control which should remain in our own hands.

AMERICAN MEDICAL ASSOCIATION REPORTS

From the reports of officers, bureaus, and councils, published in the April 4 *Journal of the American Medical Association*, the following more important items are extracted and comments appended.

Membership.—California is credited with 5,382 members. This places our State as fourth in size of membership. Our State has 3,318 Fellows and 2,278 subscribers to the national journal. These subscribers could become Fellows simply by making application, and without additional cost. The State is listed as having 10,490 physicians. This is probably true, but many hundreds are retired from practice.

It is stated that we have ten unorganized counties. California has no unorganized counties.

The American Medical Association has 101,754 members and 62,997 Fellows. *Hygeia* has 86,745 subscribers.

Building.—Two stories are being added to the headquarters building, and the brick walls replaced with stone. Alterations and new equipment cost \$425,000.

Council on Pharmacy and Chemistry.

The Council has completed thirty years of service. Conditions today are decidedly better, though there are still some physicians who have not yet fully realized the detrimental influence of certain types of low grade pharmaceutical concerns. However, the scientific standing of the average pharmaceutical house is vastly improved.

During 1935 a number of new and unusual drugs were accepted by the Council for inclusion in New and Non-official Remedies.

Useful Drugs and the Epitome of the U. S. Pharmacopeia and National Formulary have been thoroughly revised to bring them into conformity with the new Pharmacopeia and the new National Formulary. They enjoy wide distribution.

The Council has continued the issuance of reports on the status of untried or previously unannounced drugs. It is still looked to for the standardization of new products.

The Council has under way a special investigation of catgut sutures.

The series of articles on Glandular Physiology and Therapy reports on a much needed survey of this field and has been a decided aid in evaluating the status of proprietary and nonproprietary glandular products. The articles have been published in book form. Requests for the privilege of translating the articles have been received from nine different countries.

The Council published two articles on Nonspecific Protein Therapy, which should aid in overcoming the chaotic condition of this subject.

The Council on Pharmacy and Chemistry and the Committee on Foods have formed a Coöperative Committee on Vitamins. This committee has made recommendations on vitamin problems, the decisions on which are soon to be issued. It has been emphasized to physicians as well as to manufacturers that in this field particularly a conservative attitude, based on adequate clinical evidence, is the criterion of sound therapeutic progress.

The Council on Pharmacy and Chemistry, in coöperation with the Council on Physical Therapy and the Committee on Foods, has adopted a reorganization plan which provides for a federation of the administrative work of the three groups and a correlation of overlapping problems.

Physicians are making increased use of the conclusions of the Council on Pharmacy and Chemistry, as evidenced by the increase in work.

Bureau of Medical Economics.

The activities of the Bureau of Medical Economics for the year 1935 may be summarized under the following headings:

Sickness Insurance.—Continued study of the subject; collection of reports of foreign systems, statistical data and comparison of vital statistics under these systems with nearly comparable statistics in the United States, where possible; preparation of statements setting forth the characteristics of sickness insurance and distribution of reports and specially prepared articles on sickness insurance.

Medical Service Plans.—Continued study of county medical society plans; criticism of proposed plans; collection of data and descriptive material to show well planned and balanced county medical society programs and the relative emphasis given to medical service plans; an effort to determine the measure of success attained by medical service plans in serving sick people.

Distribution of Physicians in the United States.—A study with fifty-four tables and fifteen charts to show, in part, the distribution of physicians according to population, type of practice, age and geographic location of the physicians listed in the 1931 American Medical Directory.

Medical Relations Under Workmen's Compensation.—Revision of the original report on this subject to include the changes in workmen's compensation laws and relations that were made in 1933, 1934 and the first half of 1935.

Care of the Indigent Sick.—Comment and suggestions offered on plans for the medical care of the indigent proposed by county and state medical societies.

University and College Student Health Service.—Completion of a study of University and College Student Health Service requested by the Board of Trustees in 1934 with summary and conclusions.

Group Hospitalization.—Attempt to define the term "group hospitalization"; compilation of list of group hospitalization organizations; collection of data pertaining to the experience of this new method of providing hospital facilities for the sick; criticism of proposed plans and advice concerning the attitude of the American Medical Association toward such plans.

Relation of Medical Ethics and Medical Economics.—A report nearly completed, which endeavors to show the economic implications in the Principles of Medical Ethics and a discussion of the ethical applications of the principles of medical economics.

Debate on State Medicine.—Preparation of special article for the official handbook of the National University Extension Association Debate Committee; distribution of publications of the Bureau of Medical Economics to medical societies, individual physicians, student debating teams, university extension departments and high school, college and public libraries.

General.—Travel; forty visits to thirty-three cities in eighteen states and the District of Columbia, covering a total distance of 38,610 miles. Speaking engagements and conferences; seventy-eight addresses and conferences with an attendance of 7,900, mostly physicians. Correspondence, 3,263 communications.

PROPOSED PROGRAM

1. Continued study of state-managed medical systems of foreign countries and preparation of data and reports for the use of the medical profession.

2. A study of medical service plans to determine, if possible, the measure of success they have attained in making medical services more easily available to the people of low incomes.

3. Compilation of additional data on distribution of physicians in the United States and in foreign countries.

4. Preparation of new material, to be used in revisions of the publications "Medical Relations Under Workmen's Compensation" and "Care of the Indigent Sick."

5. Completion of study now in progress on group hospitalization.

6. Revision of publication "Collecting Medical Fees."

7. A study of rural medical facilities.

8. Coöperation with Council on Medical Education and Hospitals in furnishing material and suggestions to medical schools on the instruction of medical students in medical economics.

Finances.—The American Medical Association has a reserve of \$2,237,478.13 and a net worth of \$3,821,102.57. Operating expenses were in excess of one and one-quarter million dollars. The larger part was for publication costs. There are some 550 persons in the employ of the Association.

Judicial Council.—We urge members to read and conform to the following extracts:

GROUP HOSPITALIZATION

Group hospitalization and individual hospital insurance plans have been rapidly spreading during the last few years as an effort on the part of hospitals to collect full payment for the hospitalization of people of low income groups who in the past have been and in the future will otherwise be unable to pay their hospital costs. This effort has been accentuated by the recent increase in the numbers of such cases combined with a great reduction in hospital income from endowment funds and public contributions. It is an effort at self-preservation and secondarily to fix responsibility on a group that during the depression has been rapidly growing among those who have little sense of personal responsibility and rather expect government or charity to care for their needs. Hospital insurance as an economic device now exists almost nationally and is spreading. The American Hospital Association and various state hospital associations are actively promulgating it.

Whether the scheme is or is not financially or economically sound is not the problem of our organization, but it is our business to see that the furnishing of medical service is not included in the sale of insured hospital accommodations. This can be done if a strong stand is taken and maintained by the organized medical profession, which must keep a watchful eye to see that medical care is not initially or later included when the usual sales efforts demand increased benefits to purchasers. It is well known that at the present time independently of the hospital insurance movement various hospitals are invading the field of practice of medicine, sometimes at and sometimes against the desire of the members of our profession involved in such instances. It would seem that in this time of extensive changes in hospital economics the point had arrived at which further marriages between hospitals and staff physicians that make the doctor of medicine the servant of the hospital should be stopped and a series of attempts at divorce among marriages that have already taken place should be instituted. Our accepted ethical principles are adequate at the present time and the coöperation of the Council on Medical Education and Hospitals would be of invaluable assistance. It is not an impossible task but will need a militant local and national ethical spirit behind it and a frowning on those individuals in the profession who on personal grounds do not object to the gradual subjugation of the medical profession in the growth of hospital domination.

ASSOCIATION WITH CULTS

There are several general ethical principles underlying cult practice in its relation to medical practice as carried out by doctors of medicine. Primarily the basis for an ethical code is the well-being of the people at large, who are dependent on the profession of medicine for their health. The profession of medicine is the custodian of the accumulated knowledge in medicine and should use it for the benefit of humanity. This knowledge, technical in nature and developed by experience, can be interpreted to the body of the people only by persons educated to understand it and trained to apply it. Of all those professing to heal the sick only the doctor of medicine has sufficient education and training to make use of the in-

formation already accumulated and keep abreast of that being developed continuously. We grant that even though this is true no one is compelled to choose only from this group in selecting his medical attendants. The individual may elect to receive his medical care from himself, his neighbor, osteopathy, chiropractic, naturopathy or Christian science, but he is not entitled while under the care of such irregulars to demand that the man educated in scientific medicine furnish opinion and advice to one so far deficient in education that he cannot so understand and apply that opinion and advice as to be able to make satisfactory use of it. Such degrading consultation would cheat the patient out of that which he might expect and the subsequent failure of results bring discredit on the science of medicine. If this is true of the occasional individual consultation, how much greater must it be in the case of repeated or continual miscegenation!

The Judicial Council is in receipt of much correspondence attempting to justify if not to advocate consultations between doctors of medicine and chiropractors, osteopaths, Christian scientists and other cultists and irregular practitioners; also appearance before their societies, teaching in their schools, and their admittance to hospital practice on a parity with the medical profession. The universal argument for all the procedures mentioned is based on the false premise "to work them gradually into regular medicine." One of our principles of ethics is as follows: "The obligation assumed on entering the profession . . . demands that the physician use every honorable means to uphold the dignity and honor of his vocation, to exalt its standards and to extend its sphere of usefulness." Such specious argument as mentioned above seems to the Council to lack substance and be unreal. It seems impossible that knowledge gained through years of scientific laboratory work and teaching can be assimilated by those of less preliminary training and use of scientific methods of investigation and practice ever to fit them to enter a profession the dignity and honor of which, the standards and sphere of influence of which, we are obligated to uphold, exalt and extend for the service the profession can render to humanity. We further are of the opinion that it is just as impractical to suggest that the small percentage of cult practitioners will through close relationship with the membership of our profession be raised to our professional standards as it is to expect the few rot-speckled apples in the apple barrel to become whole because of the preponderance of sound ones. We believe in continuous, complete separation between the true and the specious physician. Our traditional responsibility for the dissemination of sound scientific treatment for the people and for protection against the insidious influence of the weaker among our own is ever present. If and when the time comes that government through legislation places the cultist on the same legal plane with us, we must strive to maintain the aristocracy of learning and culture. A physical and professional separation as complete as is possible should be established and maintained.

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CORRESPONDENCE CONCERNING CARDS RECENTLY SENT OUT FROM CENTRAL OFFICE

Letter to Secretary from a Member

March 31, 1936.

F. C. Warnshuis, M. D.

Secretary, California Medical Association

Dear Doctor:

I beg to acknowledge your two very neat enclosures for framing in our offices. I have pondered a good deal about the one "You and Your Doctor" ever since receiving it. As I told you last time we met at the Alameda County meeting, I have been in practice long enough to know the many changes that have taken place in all the phases of our economic and professional life. I am also aware that those who are in a position to alter and meet the demands of both contingencies have labored faithfully to overcome them. But while, on the whole, they are on the right track, they allow their good judgment to be choked and the effects of their initiative smothered by tradition, which hampers the results they so ardently seek.

So to return to our "You and Your Doctor" as the pertinent thing in this letter, let me ask you frankly: First, how many doctors will frame it and put it in their offices? Second, if they do, how many patients will read them? We know what should be done, but we have not the courage to do it—at least, not in the way it should be done to bring about the results we are after. We are scared to death of the "dignity" of the medical profession.

Well, when it comes to that, the doctors have ruined that more or less, step by step, by their own deeds, jealousies, unprofessional remarks and innuendos, and personal conduct, long ago. So they cannot injure it much more, so far as the public is concerned, than they already have. What we need more than anything else is decency and discipline among ourselves. I know, as I was one of the "privileged ones" for many years and have been just as guilty as many other so-called "Simon-pure" elites of the profession by *laissez faire* without offering any objections.

Competition has been so keen of late years (because of the short-sightedness of those in a position to prevent it) that we are facing a situation that demands courage, wisdom, education, and energetic treatment, lest our younger members starve or become the slaves of the state and nation. You will answer to that, "We have been doing these things for years with *some results*." And my reply is, yes, we have been doing it just as the preachers have been preaching to congregations all over the land to people who voluntarily go to church and do not need the sermons. It is to those who do not go to hear the sermons that the truth should be rammed down their throats. Just as medical propaganda, as you suggest in your leaflet, should be taught to those who never hear or read medical talks or advice, and who never think of health until they are ill. These poor irresponsible human beings, 80 per cent of our population, never think of health in medical or economic terms.

This is, I have said for years, where we should step in with dignity and sincerity. We have worked our heads off in behalf of prevention. The laboratories and research foundations have done a great work, but little has been done to really educate the public concerning the use of the cures and the care of the ills we cannot prevent.

So, why be half-hearted in applying the remedies we know only too well as the only remedies for our dilemma. Why not tackle the enemy in his lair. The public cannot discriminate between the education of the truth, as we know it, and the claims of the quacks, unless we who are in a position to speak in our defense half as *boldly as they do*. We cannot be considered any longer in any other light than business men with sources to sell; many of our doctors have proven that. Therefore, we should approach our problems in a business way as well as with a scientific attitude.

If suggestions are made in the half-apologetic way in which they have been made, it cannot be expected to bring the results we want. Suggestions are not enough. It is facts, constant examples and lessons never to be forgotten, by the wholesale, the public needs, not as we are doing it, sporadically.

Your pamphlet brings this one more pertinent suggestion to me. Why not send a copy to each and all our patients when we mail our monthly statements, or send to all patients on our files. It would reach a larger number of people—rich and poor, educated and ignorant—in a personal way, and bring returns far beyond the cost of such an aggressive campaign. It would give a sense of relief to thousands who do not come to us because of economic embarrassment and pride. It would at once reestablish an apparent lost confidence in the medical profession and place it on the pedestal it deserves. It would create quantity material for our offices, since we can no longer depend on quality for our financial rewards. It would create a demand for ourselves that is sorely needed and fulfil a duty we owe to the public in all the ways you have so well suggested.

Put some "punch" in our educational campaign by mail, radio, and newspaper editorials or articles in a way that would not be offensive to the most sensitive of our members. Let us not be afraid to proclaim our good intentions and ability to render humanity the altruistic services which must be realized ultimately before each and everyone's final day.

Let you may not remember me, let me say that I am in no way an advocate of any movement which would cheapen our professional dignity or standing. I have been president of a state society, twice president of the county society, and a member of the National Legislation Committee meeting in Washington, D. C., as well as oculist and aurist for two transcontinental railroads, etc. There-

fore, I feel I may offer this suggestion without any fear of misunderstanding.

I hope you will accept this letter in the sincere spirit in which I am writing it. Those of us who have lived when medical and economic problems such as those that are facing our younger members were unknown and unthought of, could well afford to sit back and let events take their course, but I for one, who has enjoyed the blessings of a better era, hope that I can in some way suggest something to help those who have had the courage and forbearance to obtain a medical education reap the reward they so justly deserve, and at the same time help an unmindful public to avail itself of the great services the medical profession can render them.

Coming from a Minnesota man, this may sound presumptuous to some California or Stanford men, but since you are a Michigan graduate I am sure you will understand.

With kindest regards, I am

Very fraternally,

H. A. BEAUDOUX, M. D.

230 Grand Avenue, Oakland.

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Reply of Secretary

Dear Doctor Beaudoux:

I am very much obliged and greatly appreciate your very interesting letter of March 31. I could probably, without mental reservation, say "Amen" to everything that you have said in your communication.

However, there are just a few points that I would like to have clarified so that you may enter into a more hopeful mood and have a little more faith in your fellow practitioners.

During the past year I have visited every county society in the State and have been in the office of one or more doctors in these counties. I recall that they displayed their membership certificates, and I was pleasantly surprised to see the number of doctors that have their certificates framed and hung on their walls, either in their reception or their consultation rooms. In ——— County I ran into a very happy incident which was related to me by two of the doctors. A general practitioner referred one of his patients to a specialist. Both agreed that an operation was necessary. The patient asked the specialist whether he was not a member of his county medical society. He replied that he was and asked why she wanted to know. She stated she did not believe he was because he did not have his certificate framed and hung on the wall as did the other doctor, and that she was not going to be operated on by a doctor who was not a member of the county medical society.

I have used this as an illustrative point in talks before county societies and also in comment that is made from month to month in CALIFORNIA AND WESTERN MEDICINE. It has resulted in the display of these certificates, and I dare say that in time we will be able to have them on display in the offices of the major part, if not all, of our members.

For the past year we have been seeking to contact the public and to acquaint them with the facts as to what scientific medicine has to offer for their physical well-being and the conservation of their health.

We are seeking to overcome the neglect that has been evidenced for so long by the profession's failure to impart to the public just what may be obtained from scientific medicine. I made the statement in a number of my talks that if medicine made no new discoveries it would take the public twenty-five years to learn what medicine has for them today. We are seeking to reduce that twenty-five-year period along several avenues. We are weekly releasing to two or three hundred newspapers of the State a three- to five-page item discussing same phase of public or private health and disease. It is pleasing to note in our clippings from the Clipping Bureau that the newspapers in the lesser populated portions of the State are printing these as well as the papers in our more populated centers. In many instances these articles constitute the only ethical source of information that these people have, and we feel that we are getting our message across.

Our second activity is Public Health Institutes, the first of which, as you probably know, was held in Oakland last November. These have been temporarily abandoned because all of our exhibits have been placed in the Hall of Medical Science at the San Diego Exposition. This building with 22,000 square feet of space is operated and sponsored by the California Medical Association and is filled with the same forty educational medical exhibits. On the opening day over nine thousand people came in and inspected the exhibits, and we trust that some of them at least learned a little. It is our program to give one or two talks in this building every week while the Fair is open until September 9. Some of these will be illustrated talks and some of them will be silent movies. I anticipate that we will reach fully a million people during the Fair season.

We have contacted Parent-Teachers' organizations, noon-day luncheon clubs, granges and farm bureaus, and we are sending speakers to them for meetings that are being sponsored by these organizations.

We have had under consideration the preparation of leaflets tersely worded but yet very clear, and had hoped to include one of these leaflets with the electric-light bills in every county. The reason why this has not been done is the expense involved because it would require the printing of approximately 55,000,000 leaflets and the Association has not the funds to do this at the present time. We are considering the preparation of leaflets or cards, or slogans, if you wish, for our members to include in their monthly statements to their patients. The only thing that is retarding us in that line is again our finances, because printing does cost money, as you undoubtedly know.

I am hopeful that the budget to be prepared and approved at Coronado will enable us to provide these leaflets and possibly some of our members will be glad to pay a small price for each series, which will help financially.

We are, in our county visits, trying to encourage and inspire our members to play the game in a fair manner. I trust you have read some of our editorial comments along this line in CALIFORNIA AND WESTERN MEDICINE. Those who have been residents of California for many years are now advising that the leaven is working, and there seems to be an apparent and palpable improvement in the attitude of doctors toward each other. Of course, we never hope to see the day when our profession will be free from its black sheep any more than the clergy or the bar becomes purified.

I am a firm believer in the doctrine of preventing the sins of the fathers from being felt by their sons. In that belief we are endeavoring to create a better and a brighter heritage for the young men in the profession who are about to enter it. You must remember, however, that this cannot be accomplished by one man. No single man ever captured a trench. Battles are only won by the coöperative efforts and unity of action of battalions and regiments and divisions. We are trying to enlist every reputable medical man in California into a division that has for its objective making better doctors, creating a kindlier spirit and feeling among doctors, and to impart to the public the sound fundamentals in regard to the problems of public and private health.

I trust I have given you an insight as to the aspirations that are being applied.

I would like very much to have your permission to publish your letter in CALIFORNIA AND WESTERN MEDICINE and a summarization of my reply to you. May I do this?

Thanking you for your communication, and with expressions of esteem and trusting that you will command us whenever you feel that we can be of service, I am

Yours very sincerely,

F. C. WARNSHUIS, M. D.,
Secretary.

A Teaser.—As a test in spelling ask your friends to write down the quoted sentence as you read it to them. The average number of errors are four. Try it and have fun.

"It is agreeable to witness the unparalleled embarrassment of an harassed connoisseur gauging the symmetry of a peeled and desiccated potato."

COUNCIL MINUTES*

Minutes of the Two Hundred and Forty-First Meeting of the Council of the California Medical Association

Held in Room 302, Sir Francis Drake Hotel, San Francisco, Friday, April 10, 1936, at 1 p. m.

1. **Call to Order.**—The meeting was called to order by Chairman T. Henshaw Kelly, with the following members present: President Robert A. Peers, Speaker W. W. Roblee, Councilors Henry J. Ullmann, Karl L. Schaupp, A. E. Anderson, A. L. Phillips, Henry S. Rogers, C. L. Emmons, Morton R. Gibbons, W. H. Kiger, Harry H. Wilson, C. E. Schoff, T. H. Kelly, C. O. Tanner, Chairman of Public Relations Committee Charles A. Dukes, Editor George H. Kress, Secretary F. C. Warnshuis, and General Counsel Hartley F. Peart.

Absent: Carl R. Howson, O. D. Hamlin; and Edward M. Palette, on account of illness.

2. **Minutes of Executive Committee.**—It was moved by Councilor Rogers, seconded by Councilor Schaupp, that the minutes of the two hundred and twenty-fourth meeting of the Executive Committee be approved and incorporated as part of the minutes of the Council. Carried.

3. **American Medical Association Correspondence.**—A letter received from the American Medical Association under date of March 2, 1936, relating to syndicated health articles in newspapers, was read, together with reply thereto as formulated by the Special Committee appointed by the Executive Committee.

After discussion, it was moved by Councilor Ullmann, seconded by Chairman of Public Relations Committee Dukes, that the letter be sent in the form approved by the Council and that it be signed by the chairman of the Council. Carried.

Doctor Wilson voted in the negative.

4. **Delegates to American Medical Association.**—The attention of the Council was called to a violation of a by-law by the action taken at the last meeting of the Council whereby a new delegate was appointed to fill the vacancy caused by the resignation of Dr. Junius B. Harris.

It was moved by President Peers, seconded by Councilor Schaupp, that the action of the Council taken at its one hundred and fortieth meeting to fill the vacancy caused by the resignation of Delegate Harris be rescinded. Carried.

5. **Code of Disciplinary Procedure.**—William W. Roblee, chairman of the Committee on Disciplinary Procedure, presented the latest draft of the Code of Disciplinary Procedure, which was discussed in detail.

A discussion of Section 3, Subsection 6, governing "Rules of Hearing, Duties of Referee, Advice as to Procedure Only," was had and on motion of Speaker Roblee, seconded by Councilor Gibbons, the section was approved as amended. Carried.

Doctors Peers and Schoff voted in the negative.

It was moved by Councilor Ullmann, seconded by Councilor Kiger, that the report of the Committee on Proposed Amendments to the By-Laws Governing Disciplinary Procedure for County Societies, be adopted as a whole. Carried.

It was moved by President Peers, seconded by Councilor Gibbons, that a vote of thanks be extended the committee for the splendid work accomplished. Carried.

It was the sense of the Council that the report be published in the Preconvention Bulletin.

6. **Dues of Association.**—The secretary read a letter from the Kern County Society signifying its willingness to voluntarily raise State Association dues \$2.50 per member; and stated that remittances for that amount per member had been received.

It was moved by Councilor Schaupp, seconded by Councilor Gibbons, that the Kern County Medical Society be notified that the Council has no authority to accept these additional dues until the House of Delegates acts, and the secretary was directed to return the overpaid dues with an explanatory letter. Carried.

7. **Division of Practice of Medicine.**—Correspondence was presented from the American Medical Association regarding the division of the practice of medicine into professional and technical parts. The secretary presented a statement containing the views of the Association, which statement had been prepared as a result of the American Medical Association's request for further elucidation of our attitude.

It was moved by Councilor Ullmann, seconded by Councilor Gibbons, that in view of the fact that the House of Delegates of the California Medical Association has gone on record stating that diagnostic and therapeutic laboratory procedures are the practice of medicine, the statement as revised by the Council be sent to all delegates of the American Medical Association. Carried.

8. **Nineteen Hundred Thirty-Seven Annual Meeting.** The Council decided that the invitation of the San Francisco County Medical Society to the California Medical Association to hold its 1937 annual session at San Francisco should be considered at the Coronado meeting.

9. **Invitation to the American Medical Association.**—A letter from the San Francisco County Medical Society requesting the California Medical Association to extend an invitation to the American Medical Association to hold its 1938 annual session in San Francisco was read.

It was moved by Councilor Schaupp, seconded by Chairman of Public Relations Committee Dukes that the California Medical Association invite the American Medical Association to hold its 1938 annual session in San Francisco. Carried.

10. **Retired Membership.**—The secretary presented membership data and requests from county societies for the granting of retired membership to five members of our Association.

It was moved by Councilor Ullmann, seconded by Chairman of Public Relations Committee Dukes, that retired membership in the California Medical Association be granted to William K. Lindsay, member of the Sacramento County Medical Society; Elmer William Weirich, member of the San Joaquin County Medical Society; and Carl Renz, Harry Spiro, and William Quinn, members of the San Francisco County Medical Society. Carried.

11. **San Diego Society.**—A letter from the San Diego County Medical Society was presented. The letter was referred for consideration at the annual session at Coronado.

It was moved by Councilor Wilson, seconded by Councilor Schaupp, that the secretary write a letter to each county society stating there is considerable variance between the provisions of the State and County constitutions and by-laws and that all county societies should rectify this so that their provisions will conform to the State Association's Constitution and By-Laws, and that in the event they see fit to adopt disciplinary action, procedure should conform to by-law provisions. Carried.

12. **Membership.**—The secretary presented correspondence regarding a former member of the San Francisco County Society now residing in Kern County.

It was moved by Councilor Gibbons, seconded by Councilor Ullmann, that the secretary be instructed to ascertain the details in this case, consult with the general counsel as to the legal status, and advise the member accordingly. Carried.

13. **Hospital Insurance.**—A communication from the American Medical Association relating to a letter signed by Dr. Howard Johnson, purporting to have had the consideration of the San Francisco County Medical Society and the California Medical Association, was presented.

It was moved by Speaker Roblee, seconded by Councilor Gibbons, that the correspondence be filed. Carried.

The secretary was authorized to write the American Medical Association stating that the matter did not come through the County or State Association.

The secretary presented correspondence from the San Mateo County Medical Society relating to a certain hospital insurance company soliciting policyholders in that community and signifying the intent of the San Mateo Society to abide by the policies and regulations of the State Association.

The general counsel read a letter he had prepared in reply to a request for information received from Doctor Graham, concerning Doctor Graham's possible remuneration.

* The minutes of the two hundred and fortieth meeting of the Council of the California Medical Association were printed in the February, 1936, issue of CALIFORNIA AND WESTERN MEDICINE, page 120.

ation for roentgenologic work done for policyholders of the Intercoast Hospital Insurance Company.

It was moved by Councilor Schaupp, seconded by Councilor Ullmann, that the general counsel furnish the information requested and that the letter of reply, which the Council approved, be used as a basis for answering similar inquiries. Carried.

14. Honorary Members.—It was moved by Editor Kress, seconded by Councilor Kiger, that the secretary be instructed to review the list of honorary members and that the Executive Committee be given power to act. Carried.

15. Roster of Members.—It was moved by Editor Kress, seconded by Councilor Ullmann, that the roster of members of the California Medical Association be published in the JOURNAL next year in the same form previously employed. Carried.

16. Current Medicine.—It was the sense of the Council that, in accordance with the request received, *Current Medicine* be granted the privilege of reprinting articles from CALIFORNIA AND WESTERN MEDICINE upon approval of the editor and the secretary.

17. Recess.—At this point the Council recessed until 8 p. m.

18. Call to Order.—The Council was called to order by T. Henshaw Kelly, chairman, with the following members present: President Peers, Speaker Roblee, Chairman of Public Relations Committee Dukes, and Councilors Kelly, Schaupp, Emmons, Ullmann, Anderson, Phillips, Hamlin, Schoff, Rogers, Wilson, Tanner, Kiger, Gibbons, Harris, Editor Kress, Secretary Warnshuis, and General Counsel Peart.

Absent: Councilor Howson and President-elect Palette, on account of illness.

19. Malpractice Insurance.—Dr. George G. Reinle, chairman of the Special Committee, being unable to attend the meeting on account of illness, the secretary submitted a progress report for the committee. A letter from Doctor Reinle, suggesting that further investigations be pursued, was read, and a report on the replies to questionnaires submitted. Consideration was given to a letter from John G. Johnston & Company.

It was moved by Chairman of Public Relations Committee Dukes, seconded by Councilor Schoff, that a vote of thanks be extended to Doctor Reinle and his committee for the work accomplished and that the committee be requested to complete the report. Carried.

It was moved by Editor Kress, seconded by Councilor Gibbons, that the report of the Malpractice Committee be received and that Doctor Reinle be requested to add to his committee the president, the president-elect, the speaker of the House of Delegates, and the chairman of the Council, and that a report be made at the first meeting of the Council at Coronado. Carried.

It was moved by Councilor Ullmann, seconded by Councilor Phillips, that notice of termination of services as insurance broker be sent to John C. Johnston & Company, as provided in the original agreement, and that he be thanked for his services. Carried.

20. Scientific Sections.—Morton R. Gibbons presented a report on scientific sections at annual sessions, and it was moved by Councilor Ullmann, seconded by Chairman of Public Relations Dukes, that a copy of the report be sent to each member of the Council for his consideration and suggestions and that the matter be taken up at the first meeting of the Council at Coronado. Carried.

21. Francis vs. Nelson.—The general counsel reported on the present status of the case of *Francis vs. Nelson*.

22. Legal Expense.—The general counsel asked that the travel and hotel expense of his associate, Mr. H. Hazzard, be paid while in attendance at the Coronado meeting.

It was moved by Speaker Roblee, seconded by Councilor Anderson that the traveling and hotel expense of Mr. Hazzard entailed in his attendance at the Coronado session be paid, subject to the approval of the Auditing Committee. Carried.

23. Tax-Supported Hospitals.—Councilor Anderson, chairman of the Committee on Tax-Supported Hospitals, submitted a progress report for his committee.

It was moved by Councilor Schaupp, seconded by Councilor Phillips, that the Council ask that the privilege of

the floor be granted Mr. Alfred Siemon during the meeting of the House of Delegates at Coronado. Carried.

It was moved by Councilor Harris, seconded by Councilor Ullmann, that each member of the California Medical Association be furnished the tax charts published by the State Chamber of Commerce for use in his reception room and that the cost of postage be financed by the Association. Carried.

24. Official Visits.—It was moved by Councilor Schaupp, seconded by Councilor Ullmann, that the secretary and the general counsel be authorized to go to any county society whenever their presence is requested if, in the judgment of the chairman of the Council, it is considered necessary. Carried.

25. Western Hospital Meeting.—It was moved by President Peers, seconded by Councilor Rogers, that a speaker be provided for the meeting of the Western Hospital Association and that his selection be left to the chairman of the Council and the secretary. Carried.

26. Recess.—At this point adjournment was taken until 9:45 a. m., Saturday, April 11.

27. Call to Order.—The meeting was called to order at 9:45 a. m. by Chairman Kelly, with the following members present: President Robert A. Peers, Speaker William W. Roblee, Chairman T. Henshaw Kelly, Councilors K. L. Schaupp, C. L. Emmons, Carl R. Howson, Henry J. Ullmann, A. E. Anderson, A. L. Phillips, C. E. Schoff, H. L. Rogers, H. H. Wilson, William H. Kiger, M. R. Gibbons, J. B. Harris, Chairman of Public Relations Committee Dukes, Secretary F. C. Warnshuis, and General Counsel Hartley F. Peart.

Absent: Councilors C. O. Tanner, O. D. Hamlin; and President-elect Edward M. Palette, on account of illness.

The Council having reviewed the action taken by that body on Friday, April 10, approved its inclusion in the official minutes of the one hundred and forty-first meeting of the Council.

28. Appeal from Kern County Medical Society Disciplinary Action.—The hour of ten o'clock having arrived, the chairman announced that the Council would hear the appeal of Doctors Joe Smith, J. M. Kirby, Homer Rogers, and R. M. Jones, from the action of the Kern County Medical Society in expelling and suspending them from membership.

Doctors Joe K. Smith and R. M. Jones appeared in person with their attorney, Mr. Harry M. Conron. Mr. Conron stated that he also represented Homer Rogers and J. M. Kirby, who were unable to be present.

Dr. Louis A. Packard appeared on behalf of the Kern County Medical Society.

Both parties were heard by the Council. (See official record.)

* * *

At the conclusion of the arguments the Council went into executive session for the purpose of reading the Kern County record. The entire record was read to the Council, together with the original charges. The several exhibits were reviewed.

Deliberation was then adjourned pending the receipt of the summarizing briefs that were to be submitted by both parties.

29. Recess.—At this point a recess was declared until 1:45 p. m.

* * *

30. Call to Order.—The meeting was called to order by the chairman of the Council, with the following members present: President Robert A. Peers, Speaker W. W. Roblee, Chairman T. Henshaw Kelly, Councilors C. L. Emmons, Carl R. Howson, Henry J. Ullmann, A. E. Anderson, A. L. Phillips, C. E. Schoff, H. L. Rogers, H. H. Wilson, William H. Kiger, J. B. Harris, Chairman of Public Relations Committee Charles A. Dukes, Secretary F. C. Warnshuis, and General Counsel Hartley F. Peart.

Absent: Councilors C. O. Tanner, O. D. Hamlin, M. R. Gibbons and Karl L. Schaupp, Editor George H. Kress; and President-Elect E. M. Palette on account of illness.

31. Appeal from San Francisco County Medical Society Disciplinary Procedure.

The hour of two o'clock having arrived, the chairman announced that the Council would now hear the appeal of Doctors Ferd W. Callison, Harry M. Davis, Herbert Cohn, Edward M. Talbott, Bertram Stone, J. F. Pressley, George G. Heppner, Frank E. Stiles, J. L. McClure, and Louis Clive Jacobs, from the action of the San Francisco County Medical Society in expelling and suspending them from membership.

He further announced that Councilors Gibbons and Schaupp would be excused from the meeting, since they were disqualified from acting in the matter of this appeal because of previous direct connection with the action of the San Francisco County Medical Society. These councilors then left the meeting.

Mr. Albert Rosenshine, an attorney, stated that he represented all the appellants who were present.

Dr. Stanley Mentzer represented the San Francisco County Medical Society.

Arguments were made by both parties. (See official record.)

Both parties agreed to submit briefs.

* * *

Council convened in executive session for deliberation. At 4:15 p. m. deliberation was adjourned to be resumed at the next Council meeting.

32. Next Meeting of Council.—The next meeting of the Council was fixed as 2 p. m. Sunday May 24, 1936, at Coronado.

33. Adjournment.—There being no further business to come before the Council, on motion of Anderson, seconded by Phillips, the Council adjourned.

T. HENSHAW KELLY, *Chairman*.
F. C. WARNSHUIS, *Secretary*.

COMPONENT COUNTY MEDICAL SOCIETIES

HUMBOLDT COUNTY

The Humboldt County Medical Society held its regular monthly meeting on the evening of April 2 at the General Hospital, with the vice-president, Allan Watson, presiding. Twenty members were present. We had as visitors, Superior Judge Harry Falk and Doctors R. A. Cushman and R. B. Toller of the Mendocino State Hospital at Talmage.

On motion, a letter was directed forwarded to Governor Merriam commending him for the reappointment of Dr. Charles B. Pinkham and former members to the State Board of Medical Examiners.

Dr. Maurice M. Hoilien was elected to membership in the Society.

Dr. Ruggles A. Cushman spoke on *Various Degrees of Psychosis*.

After a very enjoyable dinner the meeting adjourned.

LAWRENCE A. WING, *Secretary*.

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MARIN COUNTY

The regular meeting of the Marin County Medical Society was held at the Marin Golf and Country Club on March 26. Councilor Henry Rogers was present.

Dr. Edward Shaw of San Francisco gave a very interesting talk on *Prophylaxis of the Diseases of Childhood*.

CARL W. CLARK, *Secretary*.

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ORANGE COUNTY

Twenty-three members of the Orange County Medical Association attended the Tri-County Postgraduate Conference at Riverside on March 22.

There will be no meeting for the month of April, as the date of the Tri-County Postgraduate Conference at San Bernardino is on the same date as our regular meeting.

It is the plan that our society go to the San Bernardino conference in a body. The Society feels that these post-graduate meetings are of inestimable value to us because of the high type of, and well-qualified men who are giving the lectures.

I am very happy to announce at this time that we have only seven delinquent members in the Society who have not paid their 1936 dues.

C. GLENN CURTIS, *Secretary*.

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PLACER COUNTY

The Placer County Medical Society held its February meeting at the Freeman Hotel, Auburn. The meeting was called to order by President Louis E. Jones at 8:30 p.m.

In addition to President Jones, there were present the following members and visitors:

Members—Doctors Vinks, Padgett, Atkinson, Mackay, Thoren, Lewis, Briner, Peers, Miller, and Russell.

Visitors—Dr. Emile Holman, professor of surgery, Stanford University School of Medicine, San Francisco; Dr. Frank Macdonald, president of the Sacramento Society for Medical Improvement; and Doctor Ward.

The application of Dr. Clarence Quinan of Nevada City for transfer of membership from the San Francisco County Medical Society was read and unanimously accepted. Doctor Quinan thus becomes a member of the Placer County Medical Society.

The application of Dr. Richard T. Hamer of Grass Valley for membership was read. The secretary stated that the matter had been referred to Doctor Warnshuis, State Secretary.

Following the reading of communications, Dr. Louis E. Jones and Dr. Robert A. Peers gave reports on the January 18 meeting in San Francisco between county officers and state officers.

Dr. R. C. Atkinson of Colfax reported a case of glioma discovered during his examination of a three-year-old child, which diagnosis was confirmed by Dr. William M. Miller of Auburn. The diagnosis was confirmed at operation.

President Jones then introduced Dr. Emile Holman, who delivered an illustrated lecture on *The Management of Gastric Ulcer and Its Complications—Medical and Surgical Considerations*.

In his address Doctor Holman pointed out that neither the patient nor the lesion will permit the adoption of a standard procedure. Moreover, one must recognize that the problems presented by duodenal are quite distinct from those presented by gastric ulcer.

Ulceration of the greater curvature is, in ninety-nine cases out of one hundred, malignant and should be so treated, when discovered, by subtotal resection. The fact that 4 to 10 per cent of ulcers on the lesser curvature may, when first seen, be malignant makes it imperative that each peptic ulcer encountered must be considered potentially malignant unless proved otherwise.

As to duodenal ulcer, the most conservative attitude possible must be adopted, so far as surgical measures are concerned; but the most radical attitude possible, so far as medical measures are concerned. Such a medical regimen should exclude such articles from the diet as lead to increased acidity, namely, ingestion of meat should be reduced to a minimum, the use of condiments prohibited, and the use of tobacco curtailed to one cigarette after each meal. Smoking should not be permitted when the stomach is empty; alcohol, likewise, should be avoided. Small meals with intermediate nourishment should be conscientiously followed. Excessive fatigue should be avoided by breaking the day's routine with a half-hour's rest at noon.

Before subjecting any patient to operation, certain preliminary measures are in order: Dental sepsis should be eliminated; x-rays are indicated to determine the presence and degree of stenosis; a chemical analysis of the gastric secretion is indispensable to determine the degree of acidity, since the degree of acidity is a very important determining factor in the choice of operation. When confronted with obstruction, intractable bleeding, perforation, or penetration into surrounding structures, with the re-

sultant uncontrollable pain, surgical assistance is obviously needed, but very careful judgment is necessary in the choice of one's operation.

A simple gastro-enterostomy in the presence of hyperacidity is definitely contra-indicated. In an elderly patient with a low or reduced acid, a gastro-enterostomy is a permissible procedure, and the more chronic the lesion the better the results.

In the presence of a hyperacidity the possible procedures are:

1. Pyloroplasty, with excision of at least one-half of the pylorus, in the hope that regurgitation of the alkaline duodenal secretions into the stomach will take place.

2. A partial gastrectomy and gastro-enterostomy, aimed at reducing the acid-secreting area of the stomach.

Surgery should be followed by continued observation of the patient and medical regimen for a long period.

Doctor Holman's address evoked general discussion, which was participated in by practically everyone present.

ROBERT A. PEERS, *Secretary*.

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SAN JOAQUIN COUNTY

A special meeting of the San Joaquin County Medical Society was called to order at 8:15 p. m., Thursday, March 19, by President T. C. O'Connor. Twenty-two members were in attendance.

A communication from Dr. F. C. Warnshuis, concerning the endorsement of the Inter-Coast Hospital Insurance Company's policies and plans by the San Joaquin County Medical Society, was read. A communication from Dr. F. A. MacDonald of the Sacramento Society for Medical Improvement concerning the Inter-Coast Hospital Insurance Company's plan to enter this county and sell policies for hospital insurance, was read.

The meeting was turned over to Doctor MacDonald and Mr. Bowman, the manager of the Inter-Coast Hospital Insurance Company. They presented the salient facts and policies of the Inter-Coast Hospital Insurance Company and answered many questions.

It was the consensus of opinion among the members that until the California Medical Association had arrived at some understanding with the radiologists and pathologists that no recommendation by the Society be given to the Insurance Company at this time.

A motion was made by Dr. Dewey Powell, seconded by Doctor Peterson, that the Society withhold its endorsement and refer the matter to the Board of Directors and the Committee on Public Relations for further study. The motion was carried.

President O'Connor requested that the May meeting be devoted to legislative matters.

P. B. GALLEGOS, *Secretary pro tem*.

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The regular meeting of the San Joaquin County Medical Society was held April 2 in the Medico-Dental club-room.

The customary supper meeting was held at the Hotel Wolf at 6:15 p. m., preceding the regular meeting. There were twenty-two members and guests present. There was no prepared paper given at this meeting, the scientific program being a series of films on rectal and spinal anesthesia, presented by an eastern drug firm.

President T. C. O'Connor called the regular meeting to order at 8:15 p. m.

The petition of Dr. Thomas W. Hagerty for membership being reported on favorably by the Membership Committee and there being no objection from the floor, he was declared a member.

A motion was made by Dr. Dewey Powell, seconded by Doctor Peterson, that the question of the San Joaquin County Medical Society inviting the California Medical Association to meet in Stockton in 1937 be tabled. The motion carried.

A motion was made by Dr. Dewey Powell, seconded by Doctor Boehmer, that the San Joaquin Chapter of the American Red Cross be given \$50 by the Society for use in the flood relief. The motion was unanimously carried.

The papers of the evening were presented by Dr. Edward Towne of Stanford University, on *Treatment of Acute Head Injuries*, and Dr. Walter Schaller of Stanford University, on *Discussion of Complications and Sequelae Following the Treatment of Acute Head Injuries*. The papers were discussed by Doctors Pinney, O'Connor, D. Powell, and Dameron.

G. H. ROHRBACHER, *Secretary*.

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SANTA BARBARA COUNTY

The regular meeting of the Santa Barbara County Medical Society was held on Monday evening, April 13, with President Gray presiding.

The speaker of the evening, Dr. Alvin Foord of Pasadena, was introduced by Doctor Wills.

Doctor Foord divided his talk into two parts, first discussing *Normal Hematology*, then following with *Anemias*, their classification, etiology, and diagnosis.

The paper was discussed by Doctors Evans, Nuzum, Ullmann, Findley, and Cavanaugh.

Doctor Ussher reported that the health department wished to put on a diphtheria immunization campaign during the first week in May, and desired the coöperation of the Society.

Doctor Freidell reported on the proceedings of the last Council meeting.

Doctor Ullmann reported upon the transactions of the State Council, and especially stressed opposition to the petition being circulated to open county hospitals to those other than indigents.

Doctors Clinton Wilson, Russel Gates, and H. C. DeVigne were unanimously elected into the Society.

WILLIAM H. EATON, *Secretary*.

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SISKIYOU COUNTY

The regular meeting of the Siskiyou County Medical Society was held at the Yreka Inn at Yreka on March 8.

The meeting was called to order by President C. C. Dickinson.

Dr. F. W. Martin's application for membership was read. A motion was made, seconded and passed, that he be admitted to membership upon payment of his dues.

There was no old or new business to discuss. Owing to the epidemics now present in the county the meeting was very poorly attended. It was, therefore, moved, seconded and passed, by the members present that the next meeting of this society be postponed until May.

E. F. CARLSON, *Secretary*.

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TULARE COUNTY

The March meeting of the Tulare County Medical Society was held at Motley's Café Sunday, on the 15th. Dr. J. C. McClure presided.

Doctor Betts reported on the question of postgraduate clinics, and suggested a centralized meeting for the Fourth Councilor District be held rather than individual meetings.

On motion, a publicity committee was appointed to report ways and means of combating the practice of wholesale immunization and vaccination, and to advance a possible solution. Doctors Weiss, Rosson, and Zumwalt are to serve on this committee.

Dr. T. W. Cornwall of San Francisco presented a paper on *Pediatric Problems*. He stressed the important differences in child care as compared with adult reactions. New conceptions of pediatric problems and recent diagnostic and therapeutic aids were outlined in a most instructive manner.

KARL F. WEISS, *Secretary*.

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VENTURA COUNTY

The February meeting was held in Santa Barbara at the Mar Monte Hotel, in conjunction with the Santa Barbara County Medical Society, on the 19th. The meeting was addressed by President Peers and State Secretary Warnshuis.

The regular March meeting was held at the Ventura County Country Club on the 10th.

Following the dinner Doctor Shore called the meeting to order. A symposium was then presented by Doctors Evans, Elliot, and Stone, covering the various phases of peripheral arterial disease.

A brief report of the first annual Conference of County Secretaries and Officers and Council of the California Medical Association and Conference on Hospital Insurance was given by the secretary.

In regard to postgraduate courses, the members prefer to have them held in Santa Barbara. Since we favor holding these courses there, Doctor Hendricks suggested that the date and subjects be left to the Santa Barbara Society, as our members do not have any particular preference for time or topics.

Doctor Coffey suggested that hereafter a brief résumé of our meetings be given to the local newspapers. This résumé will include the names of the members attending.

Doctors Achenbach and Broughton were appointed as the April Program Committee.

* * *

The regular meeting of the Ventura County Medical Society was held at the Ventura County Country Club on Tuesday, April 14.

Following the dinner the meeting was called to order by President Shore.

Doctor Ullmann spoke on the increasing cost of malpractice insurance and of the efforts being made by the State Association to counteract this increase. He urged that all members send in their questionnaires at once. He also suggested that we be sure our by-laws correspond to those of the California Medical Association's regarding the expulsion of members. He further warned us of the new movement under way in regard to open county hospitals and urged that we be prepared to start a plan of hospital insurance in the near future as a means of counteracting said movement.

Dr. Rodney Atsatt was introduced by Dr. D. G. Clark, program chairman, and gave an interesting paper on *Spinal Fractures*, followed by slides. Discussion was started by Dr. Sterling Clark.

The business meeting was opened with a discussion of malpractice insurance. Dr. Sterling Clark suggested that we adopt a conservative course and be certain that such a plan would give us adequate protection without the cost being too high.

A motion was made by Dr. C. Smolt, seconded by Doctor Homer and unanimously passed, that the delegate use his own judgment for the best interests of the Society.

A motion was made by Dr. Sterling Clark, seconded by Dr. S. Smolt and unanimously passed, that the delegate be allowed \$40 expense money.

A motion was made by Dr. Grant Clark, seconded by Doctor Coffey, that the July and August meetings be omitted. The motion carried.

Doctor Homer was appointed chairman of the Public Relations Committee. Doctors Achenbach and Broughton were appointed on the Program Committee for May.

Mr. Ben Read is to speak at the June meeting.

A. A. MORRISON, *Secretary*.

CHANGES IN MEMBERSHIP

New Members (51)

Alameda County.—Alfred B. Berkove, John Joseph Carden, Robert Hector, Eugene W. Kenney, J. W. Peck, Charles C. Stevenson, F. Rene Van de Carr, George E. Walton, Richard A. Young.

Butte County.—A. L. Derbyshire.

Humboldt County.—Stephen Fleming.

Imperial County.—William A. Clark, John L. Parker.

Los Angeles County.—Carsten Russell Anderson, William Baker, Robert L. Blackmun, Paul C. Blaisdell, Virginia M. Cobb, Michael R. Godett, Channing W. Hale, Horace A. Hall, L. L. Henry, David Hershberg, S. P.

Johnson, John Clifton Jones, Charles J. Lopez, Alden H. Miller, Albert A. Peterson, Esther Somerfeld, Samuel J. Sperling, Robert Leo Stern, Homer M. Walker, A. W. Williams.

Marin County.—Cornwall C. Everman, R. B. Hartman.

Napa County.—Mary C. McReynolds.

Riverside County.—Lawrence E. Brown.

San Francisco County.—Olga Bridgman, Leon Goldman, Asher Donald Havenhill, Edward A. Levin, Salvatore P. Lucia, Horace J. McCorkle, John J. McKay, Mary B. Olney, Joseph M. Swindt.

San Joaquin County.—Thomas W. Hagerty, H. H. Kanagawa.

San Mateo County.—E. W. Bulley.

Santa Clara County.—Roland G. Breuer.

Solano County.—Joseph I. Porter.

Transferred (4)

Louisa Hemken, from San Bernardino County to Los Angeles County.

Thomas F. Thorp, from Humboldt County to San Joaquin County.

Clinton A. Wilson, from Monterey County to Santa Barbara County.

Howard A. Wood, from Los Angeles County to Riverside County.

Resigned (3)

Eugene R. Lewis, from Los Angeles County.

Frank R. Morgan, from Los Angeles County.

Louis Reinard, from Los Angeles County.

In Memoriam

Burg, Beatrice Victoria. Died at Los Gatos, April 4, 1936, age 43. Graduate of the University of Texas School of Medicine, Galveston, 1922. Licensed in California in 1923. Doctor Burg was a member of the Alameda County Medical Association, the California Medical Association, and the American Medical Association.

✦

Drysdale, George Nelson. Died at Crescent City, March 15, 1936, age 70. Graduate of Dalhousie University Faculty of Medicine, Halifax, Nova Scotia, 1891. Licensed in California in 1893. Doctor Drysdale was a member of the Sacramento Society for Medical Improvement, the California Medical Association, and a Fellow of the American Medical Association.

✦

Hare, George Andrew. Died at Fresno, April 4, 1936, age 78. Graduate of the University of Michigan Medical School, Ann Arbor, 1887. Licensed in California in 1892. Doctor Hare was a member of the Fresno County Medical Society, the California Medical Association, and a Fellow of the American Medical Association.

✦

Heald, Alfred Henry. Died at San Mateo, March 2, 1936, age 39. Graduate of the University of California Medical School, San Francisco, 1931, and licensed in California the same year. Doctor Heald was a member of the San Mateo County Medical Society, the California Medical Association, and a Fellow of the American Medical Association.

✦

Striegel, Raymond John. Died at Long Beach, February 26, 1936, age 39. Graduate of the University of Buffalo School of Medicine, 1921. Licensed in California in 1927. Doctor Striegel was a member of the Los Angeles County Medical Association, the California Medical Association, and the American Medical Association.

C. M. A. DEPARTMENT OF PUBLIC RELATIONS†

Public Health

In theory every physician is a public official just as the attorney is an officer of the court. In public health this theory should be a fact. Personal preventive medicine, that preventive medical service arising from the contact of the physician with his patient, from the physician's intimate knowledge of the patient's life and needs, is stressed too little in private practice. Yet the important problems in public health today are to be solved only by such relationships and the services arising therefrom.

It must follow that the activities of the public health agency should be concentrated upon education in two directions: (1) Education of the profession, to the end that it will be better able to provide the public's preventive medical needs; and (2) education of the public, to the end that it will seek preventive medical service. This is participation in a form welcome to the agency and the health departments as well as the public. Only through such participation may the hope, "every physician a health officer," be realized.

This recommendation is advanced for the consideration of individual members and ultimate action by county societies. It is anticipated that in the near future a sustained movement will be inaugurated to make every physician a practicing health officer. * * *

Ask Him?

Certain editors of local and farm journals, supervisors, heads and members of farm bureaus and granges, and aspirants for public office, have been presenting specious arguments in favor of opening county hospitals to all peoples. It is a matter of pity that these proponents in their writings and talks reflect a woeful lack of information as to the principles involved and the basic factors that are related to the question. Apparently, a quest has been determined and reasons why it should be obtained are being moulded and distorted regardless of true facts and conditions.

The suggestion is made that at every opportunity the following facts should be presented to refute these distorted and baseless statements. Interview local editors and invite them to acquaint their readers with dependable actualities.

Article IV, Section 31, of the Constitution of the State of California, forbids the use of public funds as gifts to private individuals. This section also forbids the legislature to enact a law appropriating public funds for private use or purposes. Initiatives cannot set aside the Constitution.

Given county hospital per diem patient costs are not accurate or true. In figuring them, costs of investment, interest, and certain supplies, are omitted. The taxpayer pays the difference.

It is frequently stated that private hospitals are *owned* by doctors. This is untrue, as comparatively few private hospitals are owned by doctors.

Professional services available and rendered in county hospitals are not comparable to those rendered in private hospitals nor is the staff properly manned.

Many doctors on services in county hospitals are not paid for their professional attendance on patients.

Many patients admitted to county hospitals could pay for hospital care in private hospitals were they but willing to forego de luxe private rooms and private nurses.

Many patients admitted to county hospitals could pay for physicians' services. Physicians are quite willing to adjust their fees to the patient's ability to pay.

Ask him—the proponent—what he thinks of the following plan, inasmuch as the trend is to endeavor to obtain all one can for nothing or less than cost.

† The complete roster of the Committee on Public Relations is printed on page 2 of the front advertising section of each issue. Dr. Charles A. Dukes of Oakland is the chairman, and Dr. F. C. Warnshuis is the secretary. Component county societies and California Medical Association members are invited to present their problems to the committee. All communications should be sent to the director of the department, Dr. F. C. Warnshuis, Room 2004, Four Fifty Sutter Street, San Francisco.

There are many acres of land tax defaulted and years in tax arrears. There are hundreds on relief or on work projects. Why not have the county or state take over these lands? Build barracks or houses on them. Send those on relief to these farms and let them till this land. Plant acres on acres of food products. Harvest the crops and store them in central or community warehouses. Place livestock, cows, sheep, pigs, chickens, in the pastures. Send the milk, eggs, and meat to the community warehouse. Then let every individual, without regard to his financial resources, come and buy milk at two cents a quart, eggs at six cents a dozen, meat at five cents a pound, and other products at prices that equal costs of production. There should be no farmer profit. Compete with the farmer. It is a right we all have!

We are not fostering this suggestion. It is cited as being as tenable and as exemplary as the reasoning of those who demand hospital care in county hospitals at cost.

There is need to impart actual conditions to those who argue erroneously. They need to be shown why they should not repeat an error similar to the one they made when they voted large sums and increased taxes to build county hospitals that are luxurious, expensively equipped and costly to operate for what the constitution, the law and the courts declare can be used only for the care of the poor, the indigent, or in certain emergencies.

* * *

Division of Medicine Into Professional and Technical Branches

The California Medical Association, through its delegation to the American Medical Association, sponsors the following resolution:

WHEREAS, Certain organized lay groups in this country are endeavoring to arrange for the provision of diagnostic medical services along with and as part of hospital services; and

WHEREAS, The provision of such diagnostic medical services will inevitably foster fundamental changes in the practice of medicine; and

WHEREAS, Such changes in the practice of medicine may well result in deterioration of our present medical standards and especially in deterioration in the quality of medical care furnished to hospital patients; now, therefore, be it

Resolved, That it is the official policy of the House of Delegates of the American Medical Association that it disapproves of the division of any branch of medicine into technical and professional portions; and be it further

Resolved, That copies of this resolution shall be brought to the attention of the American Hospital Association and its affiliated groups, to the end that existing arrangements permitting division in medical practice be terminated as speedily as possible.

At the 1935 meeting of the California Medical Association, the following resolution was adopted:

WHEREAS, The California Medical Association is of the firm and unalterable opinion that the practice of medicine at all times should be confined to duly licensed physicians and that it recognizes the practice of radiology and clinical pathology as the practice of medicine; and

WHEREAS, The California Medical Association is of the opinion that a hospital conducting a department of radiology and/or clinical pathology should do so only to the interest of the patient and not for the purpose of profit, and that every hospital should bear in mind that in arranging for diagnostic and/or therapeutic services by such departments it does so as a matter of convenience and not as an essential right; therefore, be it

Resolved, That the Council of the California Medical Association be and hereby is authorized to take such steps as it sees fit to establish mutually equitable relations between hospitals, radiologists and clinical pathologists to the end that the practice of medicine shall be conducted by physicians and not by hospitals; provided, however, that the California Medical Association is unalterably opposed to the division of any branch of medical practice, such as radiology or pathology, into technical and professional portions; and be it further

Resolved, That the secretary of the California Medical Association be and hereby is directed to send a copy of this resolution to each of the several hospitals in the state.

In California and most other states, many hospitals, whenever possible, have employed roentgenologists and clinical pathologists on salary or commission and have actively competed with legally practicing specialists in

these fields for all of the ambulatory patients in the community. The considerable profit made from these departments frequently goes to pay deficits incurred in other departments of the hospitals.

Finding, in California at least, that all diagnosis and treatment rendered in these specialties is the practice of medicine and cannot be legally furnished by hospitals, many hospitals are developing plans for "hospital insurance," are insisting that these specialties can be divided into "professional and technical services." This is their own term and they demand that organized medicine recognize their right to sell, in these "hospital insurance" policies the "technical services" or, as they euphemistically and confusingly prefer to call them, "facilities" of these departments. The "facilities" include the taking of x-ray films, the administration of intravenous, oral, rectal medication in order to obtain proper films, and the securing of various specimens for examination, all done by lay technicians without standard training or standing in law.

The House of Delegates of the California Medical Association firmly believes that no such division should be permitted, especially in newly created organizations of hospitals designed to furnish "hospital service." If condoned, as it has been in part, or permitted, then these technicians will be actively practicing medicine. When the beginning is made, does anyone know where the separation of medicine into professional and non-professional fields will stop?

It does not require a very large imagination to visualize the urologic cystoscope and catheter technician, electrocardiograph technician, otological technician, metabolic technician, pelvimetry technician, and so on *ad absurdum*. Laboratory and physiotherapy technicians are practicing medicine today. Approve or tolerate the professional and technical division of medicine and large numbers will invade the field, lower standards, and submerge medical science.

Anticipating the evil of a division, recognizing that diagnostic and therapeutic services require complete medical training, supervision and knowledge, the House of Delegates of the California Medical Association urges the medical profession to declare its position and assume a positive attitude.

The pleadings and fallacious arguments of some hospital administrators must not warp judgment. Their desire to hold fast to a revenue-producing practice that medicine has wrongly tolerated cannot be made to constitute a sound reason or justification for its continuation. A principle is involved that must be upheld and maintained inviolate. Specious arguments must not becloud the issue. Medicine is an entity that does not permit of division into technical and professional parts. The House of Delegates of the California Medical Association and the Council believe that national and state organizations should go on record by stating their position and the taking of necessary steps to quash this invasion of the field of medical practice.

* * *

Initiatives

Petitions are now being circulated to place upon the November ballot an amendment to the State Constitution that would, if passed, authorize supervisors to admit pay patients to county hospitals. The amendment is so broad that under it medical care cannot also be included.

Another petition is being circulated seeking to secure legislation by initiative that would enact the regulations and antivivisectionists have sought unsuccessfully by means of the bills they have had introduced in previous legislatures.

If the proponents and sponsors of these legislative measures succeed in obtaining the necessary signatures, then it will become incumbent upon those who are opposed to such legislation to engage in a campaign to defeat these two initiatives. It will not be an easy campaign.

Those signing the county hospital petition apparently have given but little if any thought to the tremendous increase in taxes that will be necessary to meet the operating costs of county hospitals. No consideration is given to the effect that will be had upon the type or quality of medical care. Other untoward factors are ignored.

The antivivisectionists cling to their former arguments and sentimental pleas.

Members are urged to embrace every opportunity to enlighten their acquaintances and patients and cause them to see why these proposals should be defeated.

THE WOMEN'S AUXILIARY TO THE CALIFORNIA MEDICAL ASSOCIATION†

MRS. THOMAS J. CLARK President
MRS. ELMER BELT Editor and Chairman of Publicity

County Auxiliary Reports

Alameda County.—The Woman's Auxiliary to the Alameda County Medical Association met at the Claremont Country Club for their March meeting on the 20th. A board meeting called for 10:30 o'clock preceded the luncheon hour. The afternoon program contained two lectures, both illustrated with most interesting pictures. Mr. Joseph De Costa, a sanitary engineer of the East Bay Water Company, spoke upon *What Is Behind Our Water Faucet*, and Mr. Harold Gray of the Mosquito Abatement District told of *The Control of Mosquitoes in Alameda County*. At a business session following the program, appointments for the Nominating Committee were made.

MRS. A. W. HENRY, *Publicity Chairman*.

Los Angeles County.—The Auxiliary was privileged to have Dr. George H. Kress, editor of CALIFORNIA AND WESTERN MEDICINE, speak before them at their monthly meeting, held on March 24 in the Association headquarters. Doctor Kress explained in detail the proposed basic science or qualifying certificate law, which will require an adequate scientific foundation for all students desiring to practice the healing art in California. If this proposed law goes into effect the title of doctor will be significant as denoting a certain standard of education, rather than the confusing term it now is. Doctor Kress concluded by saying that this law would make for the protection of the health and lives of the people of the state. The second speaker of the program was Dr. Emily F. Balcom of the Los Angeles Public Health Department, who presented a thought-provoking paper on the medical aspects of the prevention and control of social diseases.

During the business Mrs. Philip Stevens, chairman of the Nominating Committee, read the names of the proposed candidates for election to office for the ensuing year. The ballot reads: President, Mrs. Clifford A. Wright; first vice-president, Mrs. Simon Jesberg; second vice-president, Mrs. Edward M. Palette; secretary, Mrs. Eric E. Larson; treasurer, Mrs. J. F. Friesen; and directors, Mrs. J. Martin Askey, Mrs. Mark A. Glaser, Mrs. John P. Nuttall, Mrs. W. H. Leake, Mrs. F. B. Settle, and Mrs. A. T. Newcomb. These officers will be installed at the May meeting.

Mrs. Walter Brem, speaking for the League of Women Voters, described the conditions in the Cambria Street School as unfit for the use of the crippled children who are assigned to it. Mrs. John V. Barrow, the Auxiliary president, requested Mrs. Arthur Annis, the secretary, to read a resolution to be presented to the Board of Education requesting that adequate facilities, in the way of proper school buildings, be provided.

Mrs. Edmund T. Remmen was a very gracious hostess at a membership tea held in her home in Glendale on Friday afternoon, March 20. Two new members were enrolled in the Glendale group.

The Long Beach Branch, at their monthly dinner meeting held in the Rainbow Tearoom on March 17, enjoyed

† As county auxiliaries of the Woman's Auxiliary to the California Medical Association are formed, the names of their officers should be forwarded to Mrs. Elmer Belt, chairman of the Publicity and Publications Committee, 2200 Live Oak Drive, Los Angeles. Brief reports of county auxiliary meetings will be welcomed by Mrs. Belt and must be sent to her before publication takes place in this column. For lists of state and county officers, see advertising page 6. The Council of the California Medical Association has instructed the editor to allocate two pages in every issue for Woman's Auxiliary notes.

a book review given by Mrs. Theodore Brewitt, city librarian.

The Auxiliary's Philanthropy Committee has made many delightful contacts by first calling on and later presenting Easter baskets to each of the thirty doctors and their families who are incapacitated by illness or old age. The committee has discovered among them some very definite needs and pressing problems which it is their hope to alleviate in part.

MRS. H. E. CROWE, *Corresponding Secretary*.

Marin County.—The regular monthly dinner meeting of the Woman's Auxiliary to the Marin County Medical Society was held on February 27 at the Marin Golf and Country Club. A large number of members and their guests were present. A talk on *Tuberculosis Prevention*, illustrated by slides, was given by Miss McGrail, Red Cross public health nurse, who is assisting in the tuberculin tests being given in the county schools. This was followed by a short business meeting, at which Mrs. Harry Hund gave a report of the State Board meeting of the Auxiliary held in Los Angeles earlier in the month.

The March meeting of the Woman's Auxiliary to the Marin County Medical Society was held on the 26th at the Marin Golf and Country Club, with Mrs. Harry Hund presiding in the absence of Mrs. Robert Furlong, the president. The speaker and guest of honor was Mrs. Thomas J. Clark, the state president, who gave a most interesting talk about the growth and aims of the Auxiliary. Mrs. E. Taylor Dykes of Oakland was also a guest of the society, and played two delightful compositions on the piano. After the program a short business meeting was held. CAROL FOWLER, *Publicity Chairman*.

Orange County.—At the April meeting of the Auxiliary held Tuesday, the 7th, at the home of Mrs. F. H. Gobar in Fullerton, the following officers for the coming year were elected: Mrs. K. H. Sutherland, president; Mrs. D. C. Cowles, vice-president; Mrs. G. Emmett Raitt, secretary; and Mrs. L. E. Wilson, treasurer. Delegates and alternates for the state convention in May were also chosen. Delegates included Mesdames Dexter Ball, D. C. Cowles, R. C. Green, and G. Wendell Olson. Alternates: Mesdames Merrill W. Hollingsworth, Harry Huffman, G. Emmett Raitt, and E. L. Russell. In her summary of work accomplished by different chairmen, Mrs. Green, president, spoke of the fact that the Auxiliary had forty-two members, six of them new, and that twelve yearly subscriptions to *Hygeia* had been given to organizations otherwise unable to take it.

Mrs. Hollingsworth introduced Dr. Nadina Kavinoky of Los Angeles, who discussed the various aspects of birth control. She spoke briefly of the development of the movement here and in England, China, Japan, and India; of the prevalence of abortion, its death toll, and its effects upon the family and society; and of the common lack of sex adjustment with its influence upon the children of the marriage. She said also that the wealth of the newer health literature on these problems, as well as the saner attitude toward childbirth, brought about by birth-control clinics, were tending to create a healthier mental state toward marriage in the younger generation.

Mrs. Gobar and her assisting hostesses, Mesdames D. C. Cowles, C. F. Kohlenberger, A. G. Nies, John Wehrly and R. P. Yeagle, then served tea, with the newly elected president and secretary presiding at the flower-laden table.

JESSIE Q. RAITT, *Publicity Chairman*.

Sacramento County.—The regular meeting of the Woman's Auxiliary to the Sacramento Society for Medical Improvement met at the home of Mrs. A. K. Dunlap on Tuesday, February 18, with the president, Mrs. Frederick N. Scatena, presiding. Mrs. Krull made a report on the library work at the county hospital, and asked for more books and magazines. Mrs. Binkley reported a membership of eighty-three. Mrs. Brendel reported that she had prepared and delivered for the Auxiliary a large basket of assorted fruits to Dr. and Mrs. Lindsay. The president asked for volunteers to aid during Safety-First Week. The Nominating Committee submitted the following ticket: For president, Mrs. E. O. Brown; first vice-

president, Mrs. George Foster; second vice-president, Mrs. A. K. Dunlap; secretary, Mrs. William Van Den Berg; corresponding secretary, Mrs. John D. Lawson; for director, to replace Mrs. E. O. Brown, Mrs. Frank P. Brendel; for directors to serve two years, Mrs. Dave Dozier, Mrs. George Briggs, and Mrs. Leo Farrell.

Mrs. Thomas J. Clark of Oakland, the state president, was then introduced by Mrs. Scatena as the guest of honor. Mrs. Clark gave a short talk about the history of the organization and made a plea for the members to strive to uphold the interests of scientific medicine. The entire group enjoyed meeting our gracious state president and appreciated her coming to Sacramento. The program concluded with vocal selections by Mr. Joe O'Brien, accompanied by Mrs. Zue Pease, which were greatly enjoyed. The hostess, assisted by Mesdames George Briggs, Charles Vanina, Leo Farrell, Lewis H. Sandborn, C. E. Schoff, Proctor Day, and Paul H. Guttman, served a delicious tea.

SARAH L. BRENDEL, *Corresponding Secretary*.

At the March meeting of the Woman's Auxiliary to the Sacramento Society for Medical Improvement held on the 17th at the home of Mrs. Frank McDonald, Mrs. E. O. Brown was elected president. The other officers of the ticket selected to serve with her were also installed. Dr. Ruth Storer of Davis gave an interesting talk on flowers and formal gardens of Europe. Annual reports were submitted by the chairmen of committees. At the next meeting delegates will be elected to attend the state convention at Coronado the last of May. Refreshments were then served by the following hostesses: Mesdames Paul Christman, C. L. Bittner, Orrin Cook, Norris Jones, J. D. Coyle, Oscar Johnson, and Frank McDonald.

ALMA LAWSON, *Corresponding Secretary*.

San Francisco County.—The Woman's Auxiliary to the San Francisco Medical Society held its regular meeting at 2180 Washington Street on Tuesday, March 17. We were fortunate in having with us on that day Dr. Langley Porter, dean of the Medical School of the University of California. Doctor Porter spoke to us in a friendly and interesting manner, making clear the hardships and difficulties of the doctor's life, and offering some sound advice to the members of the Auxiliary.

The business meeting followed, during which plans for a card party were presented by Mrs. George Becker, social chairman. This card party is to be held in the home of the San Francisco Medical Society on Washington Street on Friday, May 8. All members and those eligible for membership in the Auxiliary are urged to be present on that day and further cement the bond of unity and understanding so necessary to a successful organization. Mrs. J. C. Geiger, the county president, then made the following additional appointments: Mrs. Lionel Player as chairman of Transportation, and Mrs. Frank Rodin as chairman of Organization and Social Welfare.

Mrs. Rodin submitted to the Auxiliary board the following tentative program of activities:

To create a speakers' bureau on health and public welfare subjects.

To make a study of public health, medical institutions, and social agencies in San Francisco.

To assist in programs on health in organizations other than the Woman's Auxiliary.

To contact and to coöperate with the Red Cross, the Parent-Teacher Association, and the Public Health League.

To participate in cultural and public health educational programs for the study of the history of medicine, the national and international public health services, and the biographies of the leaders in medicine.

To sponsor the broadcasting of a series of educational health talks.

To assist the chairman of *Hygeia* to develop an educational program for better health among school children by arrangements with the health director of the second district, California Parent-Teacher Association, whereby each unit shall subscribe to *Hygeia* for the use of the Health chairman, members, and teachers.

To join the chairman of Legislation in the study of bills pertaining to medicine and public welfare.

To create a study group on peace, and on the causes and cure of war.

AMY S. ZUMWALT, *Publicity Chairman*.